FEC FORM 1

STATEMENT OF ORGANIZATION

FORM 1		(See instruction	_		Office use only
1. NAME OF COMMITTEE (in	full) X	(Check if name is changed)	Example: If typying, type over the lines	12FE4M5	
ITG Good Gov	rernment Commit	tee	<u> </u>	<u> </u>	
		11111		111111	
ADDRESS (number and	street) 804 (Green Valley Roa	ad 		
(Check if addries changed)		nsboro		l ric l	27408
COMMITTEE'S E-MA	II ADDRESS		CITY▲	STATE▲	ZIP CODE ▲
COMMITTEE 3 E-MA	IL ADDRESS				
COMMITTEE'S WEB	PAGE ADDRESS (U	I 			
COMMITTEE'S FAX N 3363796779	NUMBER	<u></u>			
2. DATE 0.3	1 / D D / Y	2008			
3. FEC IDENTIFICA	TION NUMBER		C C00040238		
4. IS THIS STATEM	MENT X NEW	(N) OR	AMENDED (A	A)	
I certify that I have exami	_	to the best of my know	vledge and belief it is true, corr	ect and complete	
Signature of Treasurer	Electronically File	d by FAYE MOR	RTON	Date 03	17 / 2008
NOTE: Submission of fa			subject the person signing thi		
Office Use Only			For further informa Federal Election Co Toll Free 800-424-9 Local 202-694-1100	mmission 530	FEC FORM 1 (Revised 02/2003)

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5.	TYPE OF COMMITTEE (Check One)	
	(a) This committee is a principal campaign committee. (Complete the candidate information below.)	
	(b) This committee is an authorized committee, and is NOT a principal campaign committee. (Complete the cainformation below.)	ndidate
	Name of Candidate	
	Candidate Office Sought: House Senate President	State District
	(c) This committee supports/opposes only one candidate, and is NOT an authorized committee.	
	Name of Candidate	
		mocratic, ublican,etc.) Party. d or party
 6.	Name of Any Connected Organization or Affiliated Committee	
L	International Textile Group Inc	
L		
	Mailing Address 804 Green Valley Road	
	Suite 300	
	Greensboro NC 274	
	CITY▲ STATE ▲ Z	IP CODE A
	Relationship connected organizati	
	Type of Connected Organization:	
	X Corporation Corporation w/o Capital Stock Labor Organization	n
	Membership Organization Trade Association Cooperative	

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Wı	rite or Type Committee Nam			
	ITG Good Governme			
7.	Custodian of Records: possession of Committ	Identify by name, address, (phone numbee books and records.	er optional), and position of	the person in
	Full Name FAY	E MORTON		
	Mailing Address	804 Green Valley Drive	9	
		Suite 300		
		Greensboro	NC_	27408
	Title or Position ♥	CITY A	STATE ▲	ZIP CODE A
	Treasur	er	Telephone number	
8.	name and address of a	ne and address (phone number option ny designated agent (e.g., assistant trea	al) of the treasurer of the comr surer).	mittee; and the
	Mailing Address	804 Green Valley Drive)	
		Suite 300		
		Greensboro	NC	27408
	Title or Position ♥	CITY A	STATE ▲	ZIP CODE A
	Treasur	er	Telephone number 336	379 2722
	Full Name of Designated Agent			
	Mailing Address			
	Title or Position ▼	CITY A	STATE A	
			Telephone number	

	FEC Form 1	(Revised 02/2003)
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Banks or Other Depositories: List all banks or other depositories in which the committee deposits funds, holds accounts, rents safety deposit boxes or maintains funds. Name of Bank, Depository, etc. Wachovia Bank NA 1512 West W T Harris Boulevard Mailing Address Charlotte NC STATE **△** ZIP CODE A CITY 🛕 Name of Bank, Depository, etc. Mailing Address ZIP CODE A CITY 🔼 STATE **△**

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